

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/937480 FILING DATE 26 SEP 2001

APPLICANT(S)

Matsuaga

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/			
2				/		
3			/			
4			/			
5			/			
6			/			
7			/			
8			/			
9			/			
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43				/		
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46			/			
47				/		
48				/		
49				/		
50				/		
TOTAL IND.			4			
TOTAL DEP.			46			
TOTAL CLAIMS			50			

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/				
52		/			-	
53		/				
54		/				
55		/				
56		/				
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97						
98						
99						
100						
TOTAL IND.		1				
TOTAL DEP.		14				
TOTAL CLAIMS		15				